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Case 15-27627-SLM Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main B1 (Official Form 1) (04/13) Document Page 1 of 64

United States Bankruptcy Court District of New Jersey					Vol	untary Petition		
Name of Debtor (if individual, enter Last, First, Middle):  Lewis, Chadwick R				Name of Joint Debtor (Spouse) (Last, First, Middle): Lewis, Christine L				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. Sec. or Individual-Taxpayer I (if more than one, state all): 0532	D. (ITIN) /Com	plete EIN	I	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): <b>7683</b>				
Street Address of Debtor (No. & Street, City, State & 16 Deckertown Tpke Sussex, NJ	έ Zip Code):			Street Address of Joint Debtor (No. & Street, City, State & Zip Code):  16 Deckertown Tpke				
	ZIPCODE 074	461	Gussex,					ZIPCODE <b>07461</b>
County of Residence or of the Principal Place of Bus <b>Sussex</b>	iness:		County of Sussex	Residence	e or of th	he Principal Plac	ce of Busin	ess:
Mailing Address of Debtor (if different from street ad	ddress)		Mailing A	ddress of	Joint De	ebtor (if differen	nt from stre	et address):
	ZIPCODE							ZIPCODE
Location of Principal Assets of Business Debtor (if d	lifferent from stre	eet address	above):				-	
								ZIPCODE
Type of Debtor (Form of Organization) (Check one box.)  ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  ✓ Chapter 15 Debtor Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  ✓ Filing Fee (Check one box)  ✓ Full Filing Fee attached  ☐ Filing Fee to be paid in installments (Applicable to only). Must attach signed application for the court consideration certifying that the debtor is unable to except in installments. Rule 1006(b). See Official  ☐ Filing Fee waiver requested (Applicable to chapter only). Must attach signed application for the court consideration. See Official Form 3B.	Single As U.S.C. §  Railroad Stockbrol Commodi Clearing Other  Debtor is Title 26 o Internal R  o individuals o pay fee Form 3A.	Stockbroker Commodity Broker Clearing Bank Other  Tax-Exempt Entity (Check box, if applicable.) Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).  Check one box: Debtor is a small business debt Debtor is not a small business of Check if: Debtor's aggregate noncontingent I than \$2,490,925 (amount subject to		under he  mess debte outsiness d  ontingent li subject to tes:	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)  Chapter 7			
Statistical/Administrative Information  Debtor estimates that funds will be available for distribution to unsecured credit Debtor estimates that, after any exempt property is excluded and administrative distribution to unsecured creditors.				id, there v	will be n	o funds availabl	le for	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors		5,001- 10,001- 25,001		25,001- 50,000		50,001- 100,000	Over 100,000	
		000,001	550,000,001 to \$100 million	\$100,00 to \$500	,	\$500,000,001 to \$1 billion	More than \$1 billion	
Estimated Liabilities		000,001	550,000,001 to 6100 million	\$100,00 to \$500	*	\$500,000,001 to \$1 billion	More than	

Case 15-27627-SLM Doc 1 Filed 09/18/1 B1 (Official Form 1) (04/13) Document	Page 2 of 64    Name of Debtor(s):	19:14:18 Desc Main Page 2	
Voluntary Petition (This page must be completed and filed in every case)	Lewis, Chadwick R & Lewis	s, Christine L	
All Prior Bankruptcy Case Filed Within Last	t 8 Years (If more than two, attac	ch additional sheet)	
Location Where Filed: <b>None</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mo	ore than one, attach additional sheet)	
Name of Debtor: None	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	ion pursuant to f 1934 and is I, the attorney for the petitioner named in the foregoing petition, declar that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have		
	X /s/ Jay D. Bhatt, Esq. Signature of Attorney for Debtor(s)	<b>9/18/15</b> Date	
Yes, and Exhibit C is attached and made a part of this petition.  No  Exhi  (To be completed by every individual debtor. If a joint petition is filed, ea  Exhibit D completed and signed by the debtor is attached and ma		nch a separate Exhibit D.)	
Exhibit D also completed and signed by the joint debtor is attached	ed a made a part of this petition.		
	O days than in any other District.  partner, or partnership pending in lace of business or principal assets but is a defendant in an action or pro-	this District. in the United States in this District, roceeding [in a federal or state court]	
Certification by a Debtor Who Reside (Check all app  Landlord has a judgment against the debtor for possession of deb	blicable boxes.)		
(Name of landlord th	at obtained judgment)		
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post			
Debtor has included in this petition the deposit with the court of filing of the petition.			
☐ Debtor certifies that he/she has served the Landlord with this cert	tification. (11 U.S.C. § 362(1)).		

Title of Authorized Individual

Date

Case 15-27627-SLM Doc 1 Filed 09/18/3	15 Entered 09/18/15 19:14:18 Desc Main Page 3 of 64 Page 3		
Voluntary Petition	Name of Debtor(s):		
(This page must be completed and filed in every case)	Lewis, Chadwick R & Lewis, Christine L		
Signa	tures		
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative		
I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X /s/ Chadwick R Lewis  Signature of Debtor Chadwick R Lewis  Signature of Joint Debtor Christine L Lewis  (973) 903-9514  Telephone Number (If not represented by attorney)  September 18, 2015	petition is true and correct, that I am the foreign representative of a debt in a foreign proceeding, and that I am authorized to file this petition.  (Check only <b>one</b> box.)  I request relief in accordance with chapter 15 of title 11, Unite States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.  Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  Signature of Foreign Representative  Printed Name of Foreign Representative		
Date Standard & Adda and *	Single Addition Building Building		
Signature of Attorney*  X /s/ Jay D. Bhatt, Esq. Signature of Attorney for Debtor(s)  Jay D. Bhatt, Esq. Law Offices Of Jay Bhatt 378 Summit Ave. Jersey City, NJ 07306 (201) 798-8000 Fax: (201) 798-8001 cpbhattlaw@gmail.com	Signature of Non-Attorney Petition Preparer  I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.		
	Printed Name and title, if any, of Bankruptcy Petition Preparer  Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the		
September 18, 2015  Date  *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)  Address		
Signature of Debtor (Corporation/Partnership)			
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Signature  Date  Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.		
X Signature of Authorized Individual	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:		
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.		

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 15-27627-SLM B1D (Official Form 1, Exhibit D) (12/09)

### Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 4 of 64 United States Bankruptcy Court

**District of New Jersey** 

IN RE:		Case No
Lewis, Chadwick R		Chapter 7
•	Debtor(s)	1

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot

do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.
Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]
If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h)

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Chadwick R Lewis	
•		

**Date: September 18, 2015** 

Certificate Number: 15557-NJ-CC-026187869



### **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>September 11, 2015</u>, at <u>9:22</u> o'clock <u>AM EDT</u>, <u>Chadwick R. Lewis</u> received from <u>Urgent Credit Counseling</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>District of New Jersey</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: September 11, 2015 By: /s/Jeremy Phillips

Name: Jeremy Phillips

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Case 15-27627-SLM B1D (Official Form 1, Exhibit D) (12/09)

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Document Page 6 of 64 United States Bankruptcy Court **District of New Jersey** 

IN RE:		Case No.
Lewis, Christine L		Chapter 7
	Debtor(s)	

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot

do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.
Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]
If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h)

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Christine L Lewis	
•		

**Date: September 18, 2015** 

Certificate Number: 15557-NJ-CC-026187870



### **CERTIFICATE OF COUNSELING**

I CERTIFY that on September 11, 2015, at 9:22 o'clock AM EDT, Christine L. Lewis received from Urgent Credit Counseling, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of New Jersey, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: September 11, 2015 By: /s/Jeremy Phillips

Name: Jeremy Phillips

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

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### Filed 09/18/15 Entered 09/18/15 19:14:18 Case 15-27627-SLM Doc 1 Desc Main Document Page 8 of 64 United States Bankruptcy Court

**District of New Jersey** 

IN RE:	Case No.
Lewis, Chadwick R & Lewis, Christine L	Chapter 7
Debtor(s)	•

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 203,884.00		
B - Personal Property	Yes	3	\$ 24,244.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$ 380,428.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 4,413.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	13		\$ 42,445.75	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			\$ 6,599.3
J - Current Expenditures of Individual Debtor(s)	Yes	4			\$ 6,528.0
	TOTAL	31	\$ 228,128.00	\$ 427,286.75	

### Case 15-27627-SLM Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 9 of 64 United States Bankruptcy Court District of New Jersey

IN RE:	Case No.
Lewis, Chadwick R & Lewis, Christine L	Chapter 7
Debtor(s)	•

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 4,413.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 4,413.00

### State the following:

Average Income (from Schedule I, Line 12)	\$ 6,599.34
Average Expenses (from Schedule J, Line 22)	\$ 6,528.00
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1	
Line 14)	\$ 8,872.99

### State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 168,210.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 4,413.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 42,445.75
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 210,655.75

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		Document	Pac	ne 10 of 64	

IN RE Lewis, Chadwick R & Lewis, Christine L

Case No.

Debtor(s) (If known)

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
16 Deckertown Turnpike, Sussex, NJ 07461		J	203,884.00	366,627.00

TOTAL

203,884.00

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07) Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 11 of 64

Debtor(s)

IN RE Lewis, Chadwick R & Lewis, Christine L

Case No.

(If known)

### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

		_			T
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	Х			
2.	Checking, savings or other financial accounts, certificates of deposit or		Chase Bank checking account - \$1,000 PNC Bank checking account *1707 - \$400	W	1,400.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Sussex Bank checking account *7585	J	300.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		2 Sofas; 4 Beds; 1 Table; 5 TVs; 1 Stereo; 1 Washer/1 Dryer; 1 Stove; 1 Refrigerator; 1 Microwave; 1 Computer; Cutlery & Crockery; Linens & Beddings.	J	875.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Debtors' Used Clothing	J	1,000.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Whole Life Policy, Payable in 30 Years	Н	unknown
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401K	W	5,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			

B6B (Official Form 6B) (12/07) - Cont. Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 12 of 64

IN RE Lewis, Chadwick R & Lewis, Christine L

Debtor(s)

\_ Case No. \_ (If known)

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	Х			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2000 Chevrolet Blazer Mileage 120,000	W	1,903.00
			2002 Acura TL Mileage 179,000	w	3,256.00
			2004 Ford F-250 Pickup Mileage 140,000	w	2,156.00
			2006 Ford Expedition Mileage 85,109	w	8,334.00
26	Boats, motors, and accessories.	Х	-		
	Aircraft and accessories.	X			
	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			

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B6B (Official Form 6B) (12/09) - Cont. M		Document	Pa	ge 13 of 64	

IN RE Lewis, Chadwick R & Lewis, Christine L

Case No. \_\_ (If known)

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
	Inventory.	X	1 Labrador Retriever	J	20.00
31.	Animals.		1 Golden Retriever	J	20.00
32.	Crops - growing or harvested. Give particulars.	X			
1	Farming equipment and implements.	X			
	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			
			TO	TAL	24,244.00

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Debtor(s)

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### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects	the exemptions t	o which	debtor i	is entitled	under:
(Check one box)					

Check if debtor claims a homestead exemption that exceeds \$155,675. \*

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY			
16 Deckertown Turnpike, Sussex, NJ 07461	11 USC § 522(d)(1)	1.00	203,884.00
SCHEDULE B - PERSONAL PROPERTY			
Chase Bank checking account - \$1,000 PNC Bank checking account *1707 - \$400	11 USC § 522(d)(5)	1,400.00	1,400.00
Sussex Bank checking account *7585	11 USC § 522(d)(5)	300.00	300.00
2 Sofas; 4 Beds; 1 Table; 5 TVs; 1 Stereo; 1 Washer/1 Dryer; 1 Stove; 1 Refrigerator; 1 Microwave; 1 Computer; Cutlery & Crockery; Linens & Beddings.	11 USC § 522(d)(3)	875.00	875.00
Debtors' Used Clothing	11 USC § 522(d)(3)	1,000.00	1,000.00
401K	11 USC § 522(d)(12)	5,000.00	5,000.00
2000 Chevrolet Blazer Mileage 120,000	11 USC § 522(d)(2) 11 USC § 522(d)(5)	1,518.00 385.00	1,903.00
2002 Acura TL Mileage 179,000	11 USC § 522(d)(5)	3,256.00	3,256.00
2004 Ford F-250 Pickup Mileage 140,000	11 USC § 522(d)(2)	2,156.00	2,156.00
2006 Ford Expedition Mileage 85,109	11 USC § 522(d)(2)	1.00	8,334.0
1 Labrador Retriever 1 Golden Retriever	11 USC § 522(d)(3)	20.00	20.00

<sup>\*</sup> Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Debtor(s)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. <b>219045</b> *	$\top$	w	12/30/2014				13,801.00	5,467.00
Community Bank NA P.O. Box 628 Olean, NY 14760-0628			Vehicle Loan					
			VALUE \$ <b>8,334.00</b>					
ACCOUNT NO. 5750010108462		Н	OPENED 1/2008				366,627.00	162,743.00
Selene Finance Lp 9990 Richmond, Ste 400 South Houston, TX 77042			MORTGAGE ACCOUNT					
			VALUE \$ 203,884.00		İ			
ACCOUNT NO.			Assignee or other notification for:					
Christiana Trust 3801 Kennet Pike, Ste. C200 Wilmington, DE 19807			Selene Finance Lp					
			VALUE \$					
ACCOUNT NO.			Assignee or other notification for:					
Phelan Hallinan & Diamond PC 400 Fellowship Rd #100 Mt. Laurel, NJ 08054			Selene Finance Lp					
			VALUE \$					
1 continuation sheets attached			(Total of t	nis j	_	e)	\$ 380,428.00	\$ 168,210.00
			(Use only on l		Tota		\$	\$
							(Report also on	(If applicable, report

Summary of Schedules.)

also on Statistical Summary of Certain Liabilities and Related Data.)

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(If known)

Debtor(s)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

			(communion sincer)					
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			Assignee or other notification for:					
Stern, Lavinthal & Frankenberg LLC Counsellors At Law 105 Eisenhower Parkway, Suite 302 Roseland, NJ 07068			Selene Finance Lp					
			VALUE \$	-				
ACCOUNT NO.  Urden Law Offices PC  Woodcrest Corporation Center 111 Woodcrest Rd, Ste. 200			Assignee or other notification for: Selene Finance Lp					
Cherry Hill, NJ 08003			VALUE \$	-				
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.			NAVVE 6					
Sheet no. 1 of 1 continuation sheets attached	.1.	L	VALUE \$	Ç1	to:			
Sheet no1 of1 continuation sheets attaches Schedule of Creditors Holding Secured Claims	ou 1	w	(Total of the	Sub nis p	oag	aı e)	\$	\$
			(Use only on la	ıst p	Tot pag	al e)	\$ 380,428.00	\$ 168,210.00

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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Debtor(s)

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### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). **Deposits by individuals** Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). **▼** Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol,

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Claims for Death or Personal Injury While Debtor Was Intoxicated

a drug, or another substance. 11 U.S.C. § 507(a)(10).

1 continuation sheets attached

IN RE Lewis, Chadwick R & Lewis, Christine L

\_ Case No. \_

(If known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

### Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. XXX-XX-0532		J	2013						
Internal Revenue Service Centralized Insolvency Operation Post Office Box 21126 Philadelphia, PA 19114-0326			Federal Income Tax Debt				2,700.00	2,700.00	
ACCOUNT NO. XXX-XX-0532		Н	2013						
Office Of UC Benefits Claimant Services P.O. Box 67503 Harrisburg, PA 17106-9894			Overpayment of Unemployment Benefits				1,713.00	1,713.00	
ACCOUNT NO.			Assignee or other notification				,	, 111	
State Of New Jersey Dept. Of Labor And Workforce Development P.O. Box 389 Trenton, NJ 08625-0389	•		for: Office Of UC Benefits						
ACCOUNT NO.									
ACCOUNT NO.									
ACCOUNT NO.									
Sheet no1 of1 continuation sheets Schedule of Creditors Holding Unsecured Priority			to S (Totals of th		age	e)	\$ 4,413.00	\$ 4,413.00	\$
(Use only on last page of the comp	olete	ed Sch	nedule E. Report also on the Summary of Sch	edu		.)	\$ 4,413.00		
			last page of the completed Schedule E. If appear al Summary of Certain Liabilities and Related	olica		э,		\$ 4,413.00	\$

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Debtor(s)

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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

		$\overline{}$		_	_		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>SC-000053-92</b>	П	Н	1991				
Ann Slockbower 23 Richards Street Ogdensburg, NJ 07439			Apartment Lease Deficiency				unknown
ACCOUNT NO. <b>DC-005965-10</b>	Г	Н	2008			П	
Arrow Financial Services LLC 5996 W Touhy Ave. Niles, IL 60714-4610			Collections Account				5,322.00
ACCOUNT NO.	П		Assignee or other notification for:	П		П	-,-
Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601			Arrow Financial Services LLC				
ACCOUNT NO. <b>xxx-xx-0532</b>	Н	Н	2009	П		П	
Atlantic Health System 100 Madison Ave. Morristown, NJ 07960			Medical Debt				775.00
	Ш		<u> </u>	Sub	tota	⊔ al	773.00
12 continuation sheets attached			(Total of th	is p	age	e)	\$ 6,097.00
			(Use only on last page of the completed Schedule F. Report		Γota o o		
			the Summary of Schedules and, if applicable, on the St	atis	tica	al	ф.
			Summary of Certain Liabilities and Related	a D	ata.	.)	\$

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Summary of Certain Liabilities and Related Data.) \$

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Debtor(s)

		(	Continuation Sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOI OI CLA	F
ACCOUNT NO.  A-1 Collections Svc 101 Grovers Mill Rd Ste 303 Lawrenceville, NJ 08648			Assignee or other notification for: Atlantic Health System					
ACCOUNT NO.  A-1 Collection Agency 715 Horizon Drive Grand Junction, CO 81506			Assignee or other notification for: Atlantic Health System					
ACCOUNT NO8708  Barclays Bank Delaware 125 S West Street Wilmington, DE 19801		Н	2006-2009 Credit Card				2.4	326.00
ACCOUNT NO.  Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123			Assignee or other notification for: Barclays Bank Delaware				2,,,	320.00
ACCOUNT NO.  Barclays Bank Delaware  Attn: Bankruptcy P.O. Box 8801  Wilmington, DE 19899			Assignee or other notification for: Barclays Bank Delaware					
ACCOUNT NO.  Pressler & Pressler 7 Entin Road Parsippany, NJ 07054			Assignee or other notification for: Barclays Bank Delaware					
ACCOUNT NO.  Barclays Bank Delaware 700 Prides Crossing Newark, DE 19713-6102			Assignee or other notification for: Barclays Bank Delaware					
Sheet no. 1 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Repor	-	age Γota	e) al	\$ 2,3	326.00
			the Summary of Schedules, and if applicable, on the S					

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\_ Case No. \_

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMC C CL	OUNT OF AIM
ACCOUNT NO. <b>4327-4779-0079-6507</b>		Н	2007-2009	+	t			
Barclays Bank Delaware 125 S West Street Wilmington, DE 19801			Credit Card					005.00
ACCOUNT NO.	$\vdash$		Assignee or other notification for:	+	H	<u> </u>	2,	,085.00
Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899			Barclays Bank Delaware					
ACCOUNT NO.			Assignee or other notification for:	+	╁			
Barclays Bank Delaware 700 Prides Crossing Newark, DE 19713-6102			Barclays Bank Delaware					
ACCOUNT NO. <b>DC-001242-02</b>		Н	2000	+	+			
Beneficial NJ Inc. 17 Academy Street Newark, NJ 07102			Personal Loan					
ACCOUNT NO. Schiff & Schiff 211 Monmouth Road P.O. Box 1000 West Long Branch, NJ 07764			Assignee or other notification for: Beneficial NJ Inc.				un	known
ACCOUNT NO. <b>-0296</b>		Н	2005-2007	+	$\vdash$			
Capital 1 Bank Attn: Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130			Credit Card				1	,459.00
ACCOUNT NO.	$\vdash$		Assignee or other notification for:	+	+		<del>  '</del> ,	,03.00
Lvnv Funding Llc Po Box 10497 Greenville, SC 29603			Capital 1 Bank					
Sheet no. 2 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of		btot		\$ 3,	,544.00
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relat	rt als Statis	Tot so c	al on al	\$	

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\_ Case No. \_

(If known)

		- (	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	T		Assignee or other notification for:	$\dagger$			
LVNV Funding LLC 625 Pilot Rd, Ste. 3 Las Vegas, NV 89119			Capital 1 Bank				
ACCOUNT NO.			Assignee or other notification for:	+			
Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601			Capital 1 Bank				
ACCOUNT NO. <b>-6064</b>		н	2007-2009	+			
Capital 1 Bank Attn: Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130			Credit Card				
LOGOVINE NO	L		Assignee or other notification for:				2,431.00
ACCOUNT NO.  Lvnv Funding Llc  Po Box 10497  Greenville, SC 29603		Capital 1	Capital 1 Bank				
ACCOUNT NO. Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601			Assignee or other notification for: Capital 1 Bank				
ACCOUNT NO. 5155-9900-0874-1310  Capital 1 Bank Attn: Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130		w	2013 Credit Card				419.00
ACCOUNT NO.			Assignee or other notification for:	+			419.00
Goldman & Warshaw PC 34 Maple Ave., Suite 101 Pine Brook, NJ 07058-9394			Capital 1 Bank				
Sheet no3 of12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t		oago	e)	\$ 2,850.00
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat	t als Statis	stic	n al	\$

\_ Case No. \_

Debtor(s)

(If known)

		(	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	1			
Portfolio Asset Recovery 120 Corporate Blvd Norfolk, VA 23502			Capital 1 Bank				
ACCOUNT NO. <b>-4323</b>	$\vdash$	w	2005	t		Х	
Capital One Bank P.O. Box 30253 Salt Lake City, UT 84130			Credit Card				unknown
ACCOUNT NO.			Assignee or other notification for:	+			ulikilowii
Goldman & Warshaw PC 34 Maple Ave., Suite 101 Pine Brook, NJ 07058-9394			Capital One Bank				
ACCOUNT NO.	H		Assignee or other notification for:				
Lyons Doughty & Veldhuis 136 Gaither Dr., Suite 100 P.O. Box 1269 Mt. Laurel, NJ 08054			Capital One Bank				
ACCOUNT NO. xxx-xx-0532		Н	2006	T			
CenturyLink Attn: Billing P.O. Box 4300 Carol Stream, IL 60197-4300			Any liability of the Debtor for the utility bills of Antler Creek Taxidermy as a personal guarantor or otherwise.				unknown
ACCOUNT NO. <b>-0455</b>	T	w	2012-2013	t			
Credit One Bank P.O. Box 98873 Las Vegas, NV 89193			Credit Card				
	_		Assigned or other notification for	-			911.00
ACCOUNT NO.  Credit One Bank P.O. Box 98875 Las Vegas, NV 89193			Assignee or other notification for: Credit One Bank				
Sheet no4 of12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the	•	age	e)	\$ 911.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	stica	n al	\$

Case	No.	

(If known)

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		(•	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. XXX-XX-7683		w	2010	Н			
Dynasplint System Inc 1033 Clifton Avenue #207 Clifton, NJ 07013			Medical Debt				12.00
ACCOUNT NO.			Assignee or other notification for:	+			12.00
Caine & Weiner Po Box 5010 Woodland Hills, CA 91365			Dynasplint System Inc				
ACCOUNT NO. 510057021924	H	w	OPENED 4/2012	+		Х	
First Niagara Bank 6950 S Transit Rd Lockport, NY 14094			Vehicle Accident Write-Off				607.00
ACCOUNT NO.			Assignee or other notification for:	H			007.00
First Niagara P.O. Box 514 6950 S Transit Road Lockport, NY 14095-0514			First Niagara Bank				
ACCOUNT NO1328 HSBC Cardmember Services P.O. Box 5894 Carol Stream, IL 60197-5894		w	2012 Credit Card			X	1,299.00
ACCOUNT NO.	$\vdash$		Assignee or other notification for:	+			1,299.00
LVNV Funding LLC P.O. Box 10497 Greenville, SC 29603			нѕвс				
ACCOUNT NO.  Markind Law Group PC 102 Browning Lane Building B, Suite 1 Cherry Hill, NJ 08003			Assignee or other notification for: HSBC				
Sheet no <b>5</b> of <b>12</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	L		(Total of th	_	age	e)	\$ 1,918.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	tica	n al	\$

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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(	Continuation Sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUN OF CLAIM	
ACCOUNT NO. <b>-9432</b>	┢	Н	2005-2008	+				
HSBC Bank P.O. Box 9 Buffalo, NY 14240			Credit Card				2 90	94.00
ACCOUNT NO.	┢		Assignee or other notification for:	+			3,08	94.00
Lvnv Funding Llc Po Box 10497 Greenville, SC 29603			HSBC Bank					
ACCOUNT NO. <b>-1424</b>	┝	Н	2004-2007	+				
HSBC Bank P.O. Box 9 Buffalo, NY 14240			Credit Card				2.41	19.00
ACCOUNT NO.			Assignee or other notification for:	+			2,4	13.00
Lvnv Funding Llc Po Box 10497 Greenville, SC 29603			HSBC Bank					
ACCOUNT NO. <b>-6939</b>		Н	2006-2008	+				
HSBC Bank P.O. Box 9 Buffalo, NY 14240			Credit Card					
A CCOUNT NO	├		Assignee or other notification for:	+		_	6,10	9.00
ACCOUNT NO.  Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123			HSBC Bank					
ACCOUNT NO.	$\vdash$		Assignee or other notification for:	+		H		
Pressler & Pressler 7 Entin Road Parsippany, NJ 07054			HSBC Bank					
Sheet no6 of12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t		ago	e)	\$ 12,42	22.00
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat	rt als Statis	tic	on al	\$	

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IN RE Lewis, Chadwick R & Lewis, Christine L

Case No.

(If known)

Desc Main

		(	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>-7085</b>		Н	2006-2008				
HSBC Bank P.O. Box 9 Buffalo, NY 14240			Credit Card				unknown
ACCOUNT NO. <b>05 0568 19673</b>		W	2015				unknown
Liberty Mutual 100 Liberty Way Dover, NH 03820			Insurance Bill				345.08
ACCOUNT NO.			Assignee or other notification for:				343.06
Liberty Mutual 100 Liberty Way Dover, NH 03820			Liberty Mutual				
ACCOUNT NO.	$\vdash$		Assignee or other notification for:				
Credit Collection Services Two Wells Ave. Newton, MA 02459			Liberty Mutual				
ACCOUNT NO. <b>DC-003862-11</b>		Н	2008 Collections Account				
LVNV Funding LLC 625 Pilot Rd, Ste. 3 Las Vegas, NV 89119							4.650.04
ACCOUNT NO.	$\vdash$		Assignee or other notification for:				1,650.04
Eltman Eltman & Cooper PC 140 Broadway, 26th Fl New York, NY 10005			LVNV Funding LLC				
ACCOUNT NO.	-		Assignee or other notification for:	$\vdash$			
Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601			LVNV Funding LLC				
Sheet no. 7 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	Sub is p			\$ 1,995.12
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Sc Summary of Certain Liabilities and Relate	also atis	tica	n d	\$

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IN RE Lewis, Chadwick R & Lewis, Christine L Debtor(s) Case No.

(If known)

Desc Main

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		((	Continuation Sheet)							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)		HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE		CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM		
ACCOUNT NO. <b>DC-003813-02</b>		Н	2001		_		H			
Ming C. Chiou, MD PC 15 Maple Avenue Warwick, NY 10990			Medical Debt							
ACCOUNT NO.	+		Assignee or other notification for:					unknown		
Faloni & Associates LLC 165 Passaic Ave., Ste. 301B Fairfield, NJ 07004			Ming C. Chiou, MD PC							
ACCOUNT NO. <b>DC-001042-12</b>	t	w	2010							
New Century Financial 110 S. Jefferson Rd Suite 104 Whippany, NJ 07981			Collections Account					1,657.00		
ACCOUNT NO.					Assignee or other notification for:					
Pressler & Pressler 7 Entin Road Parsippany, NJ 07054			New Century Financial							
ACCOUNT NO. <b>DC-003350-10</b>	+	Н	2010		_		$\dashv$			
Newton Medical Center 175 High Street Newton, NJ 07860			Medical Debt							
	+		Assignee or other notification for:	$\longrightarrow$	$\dashv$			1,149.65		
ACCOUNT NO.  American Trading Co. P.O. Box 6448  Lawrenceville, NJ 08648			Newton Medical Center							
ACCOUNT NO.	+		Assignee or other notification for:		_		$\dashv$			
Lenox, Socey, Formidoni, Giordano, Coole P.O. Box 6448 3131 Princeton Pike, Suite 1B Lawrenceville, NJ 08648			Newton Medical Center							
Sheet no. 8 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total	S al of thi	s p		- 1	\$ 2,806.65		
			(Use only on last page of the completed Schedule F.	Report		ota o o	- 1			

the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

IN RE Lewis, Chadwick R & Lewis, Christine L

\_\_\_\_\_ Case No. \_

(If known)

Desc Main

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE		UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>07422527</b>	T	J	10/10/2014				
Newtown Emergency Medical Associates P.O. Box 6352 Parsippany, NJ 07054-7352			Medical Debt				44.70
ACCOUNT NO.			Assignee or other notification for:				44.70
Newtown Emergency Medical Assoc P.O. Box 417442 Boston, MA 02241-7442			Newtown Emergency Medical Associates				
ACCOUNT NO. <b>XXX-XX-0532</b>		Н	2014				
Premier Health Associates 89 Sparta Avenue #100 Sparta Township, NJ 07871			Medical Debt				698.00
CCOUNT NO.			Assignee or other notification for:				
Berks Credit & Collections 900 Corporate Drive Reading, PA 19605			Premier Health Associates				
ACCOUNT NO. XXX-XX-7683	_	w	2012				
Radiologic Associates Of N Nj 222 High Street, Ste. 101 Newton, NJ 07860-9604			Medical Debt				
ACCOUNTING	-		Assignee or other notification for:	+			63.00
ACCOUNT NO.  Remex Inc 307 Wall St Princeton, NJ 08540			Radiologic Associates Of N Nj				
ACCOUNT NO. <b>22474639</b>		w	4/28/2015	+			
Skylands Pediatrics PCP P.O. Box 2403 Voorhees, NJ 08043-6403			Medical Debt				404.05
Sheet no <b>9</b> of <b>12</b> continuation sheets attached to			<u> </u>	Sub			121.95
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of turns)  (Use only on last page of the completed Schedule F. Repo	7	Γot	al	<b>927.65</b>
			the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relati	Statis	stic	al	\$

Summary of Certain Liabilities and Related Data.) \$

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Case No.

IN RE Lewis, Chadwick R & Lewis, Christine L

Debtor(s)

(If known)

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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		Continuation Sheet)	_				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER.  (See Instructions Above.)		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE		CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
	w	2014					
		Medical Debt					044.04
		Assignee or other notification for:				+	211.00
		Skylands Pediatrics PCP					
	w					+	
		Medical Debt					35.00
		Assignee or other notification for:				+	33.00
		Sparta Medical Association					
	w	/ 2009 Medical Debt				+	
		Acciones or other potitionation for				4	35.00
		Sparta Medical Association					
	Н	9/13/2014				+	
		Medical Debt					
							657.00
	CODEBTOR	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE  W 2014 Medical Debt  Assignee or other notification for: Skylands Pediatrics PCP  W 2009 Medical Debt  Assignee or other notification for: Sparta Medical Association  W 2009 Medical Debt  H 9/13/2014	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE      W   2014   Medical Debt	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE  W 2014 Medical Debt  Assignee or other notification for: Skylands Pediatrics PCP  W 2009 Medical Debt  Assignee or other notification for: Sparta Medical Association  W 2009 Medical Debt  H 9/13/2014	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE   DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM WAS INCURRED AND CONSIDERATION	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IS SUBJECT TO SETOFF, SO STATE  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IS SUBJECT TO SETOFF, SO STATE  W 2014 Medical Debt  Assignee or other notification for: Skylands Pediatrics PCP  W 2009 Medical Debt  Assignee or other notification for: Sparta Medical Association  W 2009 Medical Debt  Assignee or other notification for: Sparta Medical Association  H 9/13/2014

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE		TINI IOTIDATED	CALICOLATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	+		Assignee or other notification for:	+	$^{+}$		+	
Receivables Outsourcing, Inc. P.O. Box 62850 Baltimore, MD 21264-2850			St. Anthony Community Hospital					
ACCOUNT NO.	-		Assignee or other notification for:	-			+	
St. Anthony Community Hospital P.O. Box 742780 Atlanta, GA 30384-2780			St. Anthony Community Hospital					
ACCOUNT NO. <b>-2025</b>		Н	2013	+				
Syncb/ Walmart P.O. Box 965024 Orlando, FL 32896			Credit Card					
ACCOUNT NO.			Assignee or other notification for:	+		1	+	585.00
Cach, Llc 4340 S Monaco St Unit 2 Denver, CO 80237			Syncb/ Walmart					
ACCOUNT NO.  Gemb/ Walmart Attn: Bankruptcy P.O. Box 103104 Roswell, GA 30076			Assignee or other notification for: Syncb/ Walmart					
ACCOUNT NO. 0726	H	w	2012-2013	+	+	+	+	
ACCOUNT NO9726 Syncb/ Walmart P.O. Box 965024 Orlando, FL 32896-5024		, **	Credit Card					
ACCOUNT NO			Assignee or other notification for:	+	1	+	+	871.00
ACCOUNT NO.  Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502			Syncb/ Walmart					
Sheet no11 of12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o		pag	ge)	\$	1,456.00
			(Use only on last page of the completed Schedule F. Rep the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Rel	ort al Stati	so stic	cal		

\_ Case No. \_ (If known)

		(	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE		UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	T		Assignee or other notification for:	T			
Portfolio Recovery Attn: Bankruptcy P.O. Box 41067 Norfolk, VA 23541			Syncb/ Walmart				
ACCOUNT NO.			Assignee or other notification for:				
Gemb/ Walmart Attn: Bankruptcy P.O. Box 103104 Roswell, GA 30076			Syncb/ Walmart				
ACCOUNT NO.	┢		Assignee or other notification for:	╁			
Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601			Syncb/ Walmart				
ACCOUNT NO. <b>6343423</b>	$\vdash$	Н	9/29/2014	┢			
Tristate Emergency Physicians LLC 484 Temple Hill Rd, Ste. 104 New Windsor, NY 12553							162.33
ACCOUNT NO.	t		Assignee or other notification for:	t			102.00
Collection Bureau Hudson Valley 155 N Plank Road Newburgh, NY 12550			Tristate Emergency Physicians LLC				
ACCOUNT NO. 6369920100682427	╁	w	2012-2014	+			
Webbank/ Gettington 6509 Flying Cloud Drive Eden Prairie, MN 55344			Credit Card				
	-		Assigned or other notification for	-			4,092.00
ACCOUNT NO.  Gettington 6250 Ridgewood Road Saint Cloud, MN 56303			Assignee or other notification for: Webbank/ Gettington				
Sheet no12 of12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	1		[Total of the	•	age	e)	\$ 4,254.33
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	stica	n ıl	\$ <b>42,445.75</b>

B6G (Official Form 6G) (12/07)	Doc 1	Filed 09/18	/15	Entered 09/1	8/15	19:14:18	Desc Main
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IN RE Lewis, Chadwick R & Lewis, Christine L

Debtor(s)

Case No.

(If known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS. INCLUDING 7th CODE	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST.
NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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		Document	Pag	ge 33 of 64	

IN RE Lewis, Chadwick R & Lewis, Christine L

Case No.

(If known)

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

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Case 15-27627-SLM Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 34 of 64

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Fill in this in	formation to ide	entify your case:		
Debtor 1  Debtor 2	Chadwick R Lo	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name  r the: District of New Jersey	Last Name	
Case number (If known)				Check if this is: ☐ An amended filing
O#: - : - ! [	CI			A supplement showing post-petition chapter 13 income as of the following date:
Official F	-orm 61			MM / DD / YYYY

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

December 5		,,	(	, , ,					
Part 1: Describe Employm	ent								
<ol> <li>Fill in your employment information.</li> </ol>		Debtor 1		Debtor 2 or non-filing spouse					
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed  Not employed	ı	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>					
Include part-time, seasonal, or self-employed work.		0.01.11.	Maria I						
Occupation may Include student or homemaker, if it applies.	Occupation	See Schedule /	Attached	_					
	Employer's name	Number Street		Suburban Propane  93 Hampton House Rd Number Street					
	Employer's address								
				Newton, NJ 07860-0000					
City State ZIP Code  How long employed there?				City State ZIP Code  2 years and 8 months					
Part 2: Give Details About Monthly Income									
Estimate monthly income as of spouse unless you are separated		. If you have nothing	g to report for any line, v	write \$0 in the space. Include your non-filing					
If you or your non-filing spouse had below. If you need more space, a			nation for all employers	for that person on the lines					
			For Debtor 1	For Debtor 2 or non-filing spouse					
<ol> <li>List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.</li> <li>\$_5,731.83</li> </ol> \$_2,886.00									
3. Estimate and list monthly overtime pay.			3. <b>+</b> \$ <b>59.19</b>	+ \$0.00					
4. Calculate gross income. Add li		4. \$ <u>5,791.02</u>	\$ <u>2,886.00</u>						

Official Form 6l Schedule I: Your Income page 1

Page 35 of 64

Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main

Debtor 1

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Chadwick R Lewis
First Name Middle Name

Last Name

Case number (if known)

		For	Debtor 1	For Debtor 2 or non-filing spouse				
Copy line 4 here	<b>→</b> 4.	\$	5,791.02	\$ <u>2,886.00</u>				
5. List all payroll deductions:								
5a. Tax, Medicare, and Social Security deductions	5a.	\$	949.61	\$379.48				
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$0.00				
5c. Voluntary contributions for retirement plans		\$	0.00	\$ <u>173.16</u> _				
5d. Required repayments of retirement fund loans		\$	0.00	\$ <u>171.49</u>				
5e. Insurance		\$	0.00	\$ <b>387.47</b>				
5f. Domestic support obligations		\$	0.00	\$0.00				
5g. <b>Union dues</b>		\$	0.00	\$0.00				
5h. Other deductions. Specify: See Schedule Attached		+\$	0.00	+ \$176.98_				
6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$	949.61	\$ <u>1,128.07</u>				
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,841.41	\$ <u>1,757.93</u>				
8. List all other income regularly received:								
8a. Net income from rental property and from operating a business, profession, or farm								
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$0.00				
8b. Interest and dividends		\$	0.00	\$0.00				
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive								
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$0.00				
8d. Unemployment compensation	8d.	\$	0.00	\$0.00				
8e. Social Security	8e.	\$	0.00	\$0.00				
8f. Other government assistance that you regularly receive								
Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce	\$	0.00	\$0.00				
Specify:	8f.							
8g. Pension or retirement income	8g.	\$	0.00	\$0.00				
8h. Other monthly income. Specify:	8h.	+\$	0.00	+\$0.00				
9. <b>Add all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$0.00				
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$	4,841.41	+ \$ 1,757.93	= \$6,599.34_			
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> .								
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.								
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.								
Specify: 11. <b>+</b> \$ <b>0.00</b>								
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.  \$\frac{6,599.34}{\text{Combined}}\$								
monthly income  13. Do you expect an increase or decrease within the year after you file this form?  No.								
Yes. Explain: None								

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IN RE Lewis, Chadwick R & Lewis, Christine L

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Case No.

Debtor(s)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

**Continuation Sheet - Page 1 of 1** 

DEBTOR SPOUSE EMPLOYMENT:

Occupation **Driver** 

Name of Employer Suburban Propane 240 Route 10 West

How long employed 2 years Address of Employer P.O. Box 206

Whippany, NJ 07981-2105

Occupation **Delivery Driver** Name of Employer **Total Recreation** 

How long employed 1 years Address of Employer 973 Route 6

Shohulu, PA 18458-0000

**DEBTOR SPOUSE** 

Other Payroll Deductions:

Metlaw 0.00 16.47 **Health Savings Account** 0.00 160.51

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Fill in this information to identify	your case:			
Debtor 1  Chadwick R Lewis First Name  Debtor 2 (Spouse, if filing) First Name  United States Bankruptcy Court for the: I Case number (If known)  Official Form 6J  Schedule J: You  Be as complete and accurate as po	Middle Name  Last Name  Middle Name  Last Name  District of New Jersey  Last Name  District of New Jersey  Last Name  Last Name  District of New Jersey	expenses a  MM / DD / Y  A separate maintains a	ed filing ent showing post- as of the following yyy filing for Debtor 2 a separate housel	2 because Debtor 2 hold  12/13 ng correct
Part 1: Describe Your Hou	sehold			
1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a s  No  Yes. Debtor 2 must file	•			
2. Do you have dependents?  Do not list Debtor 1 and Debtor 2.  Do not state the dependents' names.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2  Son  Son  Son	Dependent's age  16  14  12	Does dependent live with you?  No Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses			
expenses as of a date after the ban applicable date. Include expenses paid for with non such assistance and have included	bankruptcy filing date unless you al kruptcy is filed. If this is a supplement cash government assistance if you lit on Schedule I: Your Income (Office expenses for your residence. Include	know the value of cial Form 6I.) first mortgage payments and	Your expenses	n and fill in the
4b. Property, homeowner's, or re	enter's insurance		4b. \$ <b>0.</b> 0	00

Official Form 6J

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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50.00

0.00

4c.

4d.

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Debtor 1

Chadwick R Lewis
First Name Middle Name

Last Name

Case number (if known)\_

6. Utilities:  6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 6d. S 0.00  7. Food and housekeeping supplies 7. S 600.00  8. Childcare and children's education costs 8. \$ 50.00  9. Clothing, laundry, and dry cleaning 9. \$ 120.00  10. Personal care products and services 10. \$ 100.00  11. Medical and dental expenses 11. \$ 65.00  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 25.00  14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 0.00  15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Insurance. 15d. Other insurance. Specify: 15d. Insurance lease payments:
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$450.00 6d. Other. Specify: 6d. Other. Specify: 6d. \$0.00  7. Food and housekeeping supplies 7. \$600.00 8. Childcare and children's education costs 8. \$50.00 9. Clothing, laundry, and dry cleaning 9. \$120.00 10. Personal care products and services 11. \$65.00 11. Medical and dental expenses 11. \$65.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$600.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15. Installment or lease payments:
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 450.00 6d. Other. Specify:
6c. Telephone, cell phone, Intermet, satellite, and cable services 6d. Other. Specify: 6d. \$ 0.00  7. Food and housekeeping supplies 7. \$ 600.00  8. Childcare and children's education costs 8. \$ 50.00  9. Clothing, laundry, and dry cleaning 9. \$ 120.00  10. Personal care products and services 10. \$ 100.00  11. Medical and dental expenses 11. \$ 65.00  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 600.00  14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$ 0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. Installment or lease payments:
ed. Other. Specify:
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8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 120.00 10. Personal care products and services 11. \$ 65.00 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$ 0.00 15e. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15a. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15b. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15e. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15a. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Specify: 15d. \$ 0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15e. Installment or lease payments:
9. Clothing, laundry, and dry cleaning 9. \$ 120.00 10. Personal care products and services 11. \$ 65.00 11. Medical and dental expenses 11. \$ 65.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 600.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15d. Installment or lease payments:
10. Personal care products and services  11. Medical and dental expenses  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Installment or lease payments:
11. Medical and dental expenses  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. \$ 0.00  15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  17. Installment or lease payments:
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  12. \$600.00  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. \$0.00  15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15r. Installment or lease payments:
Do not include car payments.  12. \$\frac{600.00}{600.00}\$  13. \$\frac{25.00}{25.00}\$  14. \$\frac{0.00}{0.00}\$  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance.  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15n. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15n. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15n. Installment or lease payments:
14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17. Installment or lease payments:
15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15a. \$ 145.00  15b. Health insurance  15c. Vehicle insurance  15c. \$ 340.00  15d. Other insurance. Specify:  15d. \$ 0.00  15d. \$ 16.
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15a. \$
15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. \$ 0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments:
15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$ 0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments:
15d. Other insurance. Specify: 15d. \$ 15d. \$ 15d. \$ 15d. \$ 16d. \$
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:
Specify: 16.  17. Installment or lease payments:
17a. Car payments for Vehicle 1 17a. \$ 383.00
17b. Car payments for Vehicle 2
17c. Other. Specify: 17c. \$
17d. Other. Specify: 17d. \$
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  \$ 0.00
19. Other payments you make to support others who do not live with you.  \$ 0.00
Specify:19.
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.
20a. Mortgages on other property 20a. \$
20b. Real estate taxes 20b. \$
20c. Property, homeowner's, or renter's insurance
20d. Maintenance, repair, and upkeep expenses 20d. \$
20e. Homeowner's association or condominium dues 20e. \$

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**Chadwick R Lewis** Debtor 1 Case number (if known)\_ First Name Last Name Middle Name 21. Other. Specify: See Schedule Attached 355.00 +\$ Your monthly expenses. Add lines 4 through 21. 6,528.00 The result is your monthly expenses. 23. Calculate your monthly net income. 6,599.34 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. 23h 6,528.00 23c. Subtract your monthly expenses from your monthly income. 71.34 The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. None Yes.

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Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

**Continuation Sheet - Page 1 of 1** 

Other Expenses (DEBTOR) **Tobacco/ Cigarettes** Pet Expenses **Childrens' Activities** 

200.00 40.00

**Joint Debtor's School Tuition** 

100.00 15.00

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Desc Main

(If known)

IN RE Lewis, Chadwick R & Lewis, Christine L

Case No.

Debtor(s)

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 33 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: September 18, 2015 Signature: /s/ Chadwick R Lewis Debtor **Chadwick R Lewis** Date: September 18, 2015 Signature: /s/ Christine L Lewis (Joint Debtor, if any) **Christine L Lewis** [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

knowledge, information, and belief.

Signature:

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## 27-SLM Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 42 of 64 United States Bankruptcy Court District of New Jersey

IN RE:	Case No.
Lewis, Chadwick R & Lewis, Christine L	Chapter 7
Debtor(s)	*

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

#### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

29,005.00 4/2015 - 8/14/2015: Total Recreation Inc. - Husband

20,480.79 1/1/2015 - 7/17/2015: Suburban Propane, LP - Wife

17,900.31 1/1/2015 - 4/24/2015: Suburban Propane, LP - Husband

43,231.93 2014: Total Recreation Inc. - Husband

28,520.36 2014: Suburban Propane, LP - Wife

8,190.53 2014: Suburban Propane, LP - Husband

27,837.00 2013: Suburban Propane, LP - Wife

4,000.00 2013: Total Recreation Inc. - Husband

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER Portfolio Recovery vs Christine

NATURE OF PROCEEDING **Credit Card Collection Case** Lewis, Docket No. DC-003525-14 Against the Debtor.

COURT OR AGENCY AND LOCATION

Superior Court of New Jersey, **Judgment** Law Division, Special Civil Part,

**Sussex County** 

**Christina Trust vs Chadwick** Lewis, et al, Docket No. F-

**CAPTION OF SUIT** 

027883-14

**Foreclosure Matter Against the** 

**Debtor** 

Sussex County, NJ

**Pending** 

STATUS OR

DISPOSITION

the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

1/1/2015 - 4/24/2015

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

LVNV Funding LLC P.O. Box 10497 Greenville, SC 29603

6/15/2015

Midland Funding LLC 8875 Aero Drive, Ste. 200 San Diego, CA 92123

DESCRIPTION AND VALUE DATE OF SEIZURE

OF PROPERTY

Bank Levy on Debtor's account with Sussex

Bank/ Value of \$120

Garnishment on Debtor's Wages/ \$1,382.49

#### 5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Bhatt Law Group** 378 Summit Ave. Jersey City, NJ 07306-0000

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 11/22/2014; 12/22/2014; 1/6/2015

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 665.00

#### 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts



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List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.



#### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN

**Antler Creek Taxidermy** 

EIN ADDRESS

16 Deckertown Tpke

Sussex, NJ 07461-0000

NATURE OF BUSINESS BEGINNING AND ENDING DATES

Taxidermy 2000 - Present

#### This business is not registered with any state.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME

#### 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within the **two years** immediately preceding the commencement of this case.

#### 20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

#### 21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

#### 22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

#### 23. Withdrawals from a partnership or distributions by a corporation

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

#### 24. Tax Consolidation Group

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

#### 25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

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[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Signature /s/ Chadwick R Lewis	Chadwick R Lewis
of Debtor	Chauwick R Lewis
Signature /s/ Christine L Lewis	
of Joint Debtor	Christine L Lewis
(if any)	
ocntinuation pages attached	
	of Debtor  Signature /s/ Christine L Lewis  of Joint Debtor (if any)

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

**B8** (Official Form 8) (12/08)

Redeem the property Reaffirm the debt

Property is (check one):

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Other. Explain Retain and pay pursuant to contract

#### Filed 09/18/15 Entered 09/18/15 19:14:18 Document Page 48 of 64 **United States Bankruptcy Court**

District of New Jorsey

Desc Main

(for example, avoid lien using 11 U.S.C. § 522(f)).

	District of New Jersey
IN RE:	Case No
Lewis, Chadwick R & Lewis, Christine L	Chapter 7
Debtor(s)	
CHAPTER 7 INDIVII	DUAL DEBTOR'S STATEMENT OF INTENTION
PART A – Debts secured by property of the estate estate. Attach additional pages if necessary.)  Property No. 1	. (Part A must be fully completed for <b>EACH</b> debt which is secured by property of the
Creditor's Name: Community Bank NA	Describe Property Securing Debt: 2006 Ford Expedition
Property will be (check one):  ☐ Surrendered ✓ Retained	
If retaining the property, I intend to (check at lea.	st one):

Claimed as exempt Not claimed as exempt Property No. 2 (if necessary) **Creditor's Name: Describe Property Securing Debt:** Selene Finance Lp 16 Deckertown Turnpike, Sussex, NJ 07461 Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): Claimed as exempt Not claimed as exempt

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):  Yes No
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):  Yes No
	<u> </u>	·

continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

**September 18, 2015** /s/ Chadwick R Lewis Date: Signature of Debtor /s/ Christine L Lewis

Signature of Joint Debtor

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IN	NRE:		Case No	
Le	ewis, Chadwick R & Lewis, Christine L		Chapter 7	
		btor(s)		
	DISCLOSURE (	OF COMPENSATION OF ATT	ORNEY FOR DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Ru one year before the filing of the petition in bankrupt of or in connection with the bankruptcy case is as for	tcy, or agreed to be paid to me, for services re		
	For legal services, I have agreed to accept			665.0
	Prior to the filing of this statement I have received			665.0
	Balance Due			S
2.	The source of the compensation paid to me was:	Debtor Other (specify):		
3.	The source of compensation to be paid to me is:	Debtor Other (specify):		
4.	✓ I have not agreed to share the above-disclosed	compensation with any other person unless the	ey are members and associates of my law firm	m.
	I have agreed to share the above-disclosed cortogether with a list of the names of the people	npensation with a person or persons who are n sharing in the compensation, is attached.	ot members or associates of my law firm. A	copy of the agreemen
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects of the bar	nkruptcy case, including:	
	<ul><li>b. Preparation and filing of any petition, schedule</li><li>c. Representation of the debtor at the meeting of</li></ul>	d rendering advice to the debtor in determining es, statement of affairs and plan which may be creditors and confirmation hearing, and any ad reedings and other contested bankruptey matter	required; ljourned hearings thereof;	
6.	By agreement with the debtor(s), the above disclose	ed fee does not include the following services:		
ı	Conceeding.	CERTIFICATION  any agreement or arrangement for payment to re	ne for representation of the debtor(s) in this	bankruptcy
	September 18, 2015	/s/ Jay D. Bhatt, Esq.		
	Date	Jay D. Briatt, Esq.  Jay D. Bhatt, Esq.  Law Offices Of Jay Bhatt  378 Summit Ave.  Jersey City, NJ 07306 (201) 798-8000 Fax: (201) 798-8001 cpbhattlaw@gmail.com		

#### UNITED STATES BANKRUPTCY COURT

### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

## Case 15-27627-SLM Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main Document Page 52 of 64 United States Bankruptcy Court District of New Jersey

IN RE:		Case No
Lewis, Chadwick R & Lewis, Chri	stine L	Chapter 7
	Debtor(s)	•
	VERIFICATION OF CREDITOR M	IATRIX
The above named debtor(s) hereb	by verify(ies) that the attached matrix listing cro	editors is true to the best of my(our) knowledge.
Date: September 18, 2015	Signature: /s/ Chadwick R Lewis	
	Chadwick R Lewis	Debtor
Date: September 18, 2015	Signature: /s/ Christine L Lewis	
	Christine L Lewis	Joint Debtor, if any

A-1 Collection Agency 715 Horizon Drive Grand Junction, CO 81506

A-1 Collections Svc 101 Grovers Mill Rd Ste 303 Lawrenceville, NJ 08648

American Trading Co. P.O. Box 6448 Lawrenceville, NJ 08648

Ann Slockbower 23 Richards Street Ogdensburg, NJ 07439

Arrow Financial Services LLC 5996 W Touhy Ave. Niles, IL 60714-4610

Atlantic Health System 100 Madison Ave. Morristown, NJ 07960

Barclays Bank Delaware 125 S West Street Wilmington, DE 19801

Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899

Barclays Bank Delaware 700 Prides Crossing Newark, DE 19713-6102 Beneficial NJ Inc. 17 Academy Street Newark, NJ 07102

Berks Credit & Coll 900 Corporate Dr Reading, PA 19605

Berks Credit & Collections 900 Corporate Drive Reading, PA 19605

Cach, Llc 4340 S Monaco St Unit 2 Denver, CO 80237

Caine & Weiner
Po Box 5010
Woodland Hills, CA 91365

Capital 1 Bank
Attn: Bankruptcy Dept.
P.O. Box 30285
Salt Lake City, UT 84130

Capital One Bank P.O. Box 30253 Salt Lake City, UT 84130

CenturyLink
Attn: Billing
P.O. Box 4300
Carol Stream, IL 60197-4300

Christiana Trust 3801 Kennet Pike, Ste. C200 Wilmington, DE 19807

Collection Bureau Hudson Valley 155 N Plank Road Newburgh, NY 12550

Community Bank NA P.O. Box 628 Olean, NY 14760-0628

Credit Collection Services Two Wells Ave. Newton, MA 02459

Credit One Bank
P.O. Box 98875
Las Vegas, NV 89193

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193

Dynasplint System Inc 1033 Clifton Avenue #207 Clifton, NJ 07013

Eltman Eltman & Cooper PC 140 Broadway, 26th Fl New York, NY 10005

Faloni & Associates LLC 165 Passaic Ave., Ste. 301B Fairfield, NJ 07004 First Niagara P.O. Box 514 6950 S Transit Road Lockport, NY 14095-0514

First Niagara Bank 6950 S Transit Rd Lockport, NY 14094

Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601

Gemb/ Walmart Attn: Bankruptcy P.O. Box 103104 Roswell, GA 30076

Gettington 6250 Ridgewood Road Saint Cloud, MN 56303

Goldman & Warshaw PC 34 Maple Ave., Suite 101 Pine Brook, NJ 07058-9394

HSBC Cardmember Services P.O. Box 5894 Carol Stream, IL 60197-5894

HSBC Bank P.O. Box 9 Buffalo, NY 14240 I.C. Systems Inc. 444 Highway 96 E P.O. Box 64378 Saint Paul, MN 55164

Internal Revenue Service Centralized Insolvency Operation Post Office Box 21126 Philadelphia, PA 19114-0326

Lenox, Socey, Formidoni, Giordano, Coole P.O. Box 6448 3131 Princeton Pike, Suite 1B Lawrenceville, NJ 08648

Liberty Mutual 100 Liberty Way Dover, NH 03820

Lvnv Funding Llc Po Box 10497 Greenville, SC 29603

LVNV Funding LLC 625 Pilot Rd, Ste. 3 Las Vegas, NV 89119

LVNV Funding LLC P.O. Box 10497 Greenville, SC 29603

Lyons Doughty & Veldhuis 136 Gaither Dr., Suite 100 P.O. Box 1269 Mt. Laurel, NJ 08054 Markind Law Group PC 102 Browning Lane Building B, Suite 1 Cherry Hill, NJ 08003

Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123

Ming C. Chiou, MD PC 15 Maple Avenue Warwick, NY 10990

New Century Financial 110 S. Jefferson Rd Suite 104 Whippany, NJ 07981

Newton Medical Center 175 High Street Newton, NJ 07860

Newtown Emergency Medical Assoc P.O. Box 417442 Boston, MA 02241-7442

Newtown Emergency Medical Associates P.O. Box 6352 Parsippany, NJ 07054-7352

Office Of UC Benefits Claimant Services P.O. Box 67503 Harrisburg, PA 17106-9894 Phelan Hallinan & Diamond PC 400 Fellowship Rd #100 Mt. Laurel, NJ 08054

Portfolio Asset Recovery 120 Corporate Blvd Norfolk, VA 23502

Portfolio Recovery Attn: Bankruptcy P.O. Box 41067 Norfolk, VA 23541

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Premier Health Associates 89 Sparta Avenue #100 Sparta Township, NJ 07871

Pressler & Pressler 7 Entin Road Parsippany, NJ 07054

Radiologic Associates Of N Nj 222 High Street, Ste. 101 Newton, NJ 07860-9604

Receivables Outsourcing, Inc. P.O. Box 62850 Baltimore, MD 21264-2850

Remex Inc 307 Wall St Princeton, NJ 08540 Schiff & Schiff 211 Monmouth Road P.O. Box 1000 West Long Branch, NJ 07764

Selene Finance Lp 9990 Richmond, Ste 400 South Houston, TX 77042

Skylands Pediatrics PCP P.O. Box 2403 Voorhees, NJ 08043-6403

Sparta Medical Association 225 State Rte 23 Hamburg, NJ 07419

St. Anthony Community Hospital 15 Maple Ave Warwick, NY 10990

St. Anthony Community Hospital P.O. Box 742780 Atlanta, GA 30384-2780

State Of New Jersey
Dept. Of Labor And Workforce Development
P.O. Box 389
Trenton, NJ 08625-0389

Stern, Lavinthal & Frankenberg LLC Counsellors At Law 105 Eisenhower Parkway, Suite 302 Roseland, NJ 07068

Syncb/ Walmart
P.O. Box 965024
Orlando, FL 32896-5024

Syncb/ Walmart P.O. Box 965024 Orlando, FL 32896

Tristate Emergency Physicians LLC 484 Temple Hill Rd, Ste. 104 New Windsor, NY 12553

Urden Law Offices PC Woodcrest Corporation Center 111 Woodcrest Rd, Ste. 200 Cherry Hill, NJ 08003

Webbank/ Gettington 6509 Flying Cloud Drive Eden Prairie, MN 55344

Fill in this information to identify your case:				
Debtor 1	Chadwick R Lewi	S Middle Name	Last Nam e	
Debtor 2 (Spouse, if filing	Christine L Lewi	Middle Name	Last Nam e	
United States	Bankruptcy Court for the	: District of New J	ersey	
Case number (If known)				

Check one box only as directed in this form and in Form 22A-1Supp:
1. There is no presumption of abuse.
2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means</i> <i>Test Calculation</i> (Official Form 22A–2).
3. The Means Test does not apply now because of qualified military service but it could apply later.

Check if this is an amended filing

Column B

Column A

#### Official Form 22A-1

#### Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - Married and your spouse is NOT filing with you. You and your spouse are:
    - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>5,986.82</u>	\$ <u>2,886.00</u>
3.	<b>Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u> </u>	\$0.00
5.	Net income from operating a business, profession, or farm		
	Gross receipts (before all deductions) \$0.00		
	Ordinary and necessary operating expenses _ \$\$0.00		
	Net monthly income from a business, profession, or farm \$ Copy here →	\$0.00	\$0.00
6.	Net income from rental and other real property		
	Gross receipts (before all deductions) \$0.00		
	Ordinary and necessary operating expenses - \$0.00		
	Net monthly income from rental or other real property \$0.00 Copy here→	\$0.00	\$0.00
7.	Interest, dividends, and royalties	\$0.00	\$0.00

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Debtor 1	Chadwick R Lewis		Case number (if known)	
	First Name Middle Nam e Last Name			
			Column A Column B Debtor 1 Debtor 2 c non-filing	or .
8. Unemp	oloyment compensation		\$ <u> </u>	<u>).00</u>
	enter the amount if you contend that the amount he Social Security Act. Instead, list it here:			
Fory	you	\$0.00		
Fory	your spouse	··· \$0.00		
	on or retirement income. Do not include any ar under the Social Security Act.	mount received that was a	\$ <u> </u>	0.00
Do not as a vio	e from all other sources not listed above. Speinclude any benefits received under the Social Sctim of a war crime, a crime against humanity, own. If necessary, list other sources on a separate	Security Act or payments received rinternational or domestic		
10a		_	\$ \$	
10b			\$	
10c. To	otal amounts from separate pages, if any.		+\$0.00 +\$	0.00
	ate your total current monthly income. Add lind in the total for Column A to the total for	•	\$_5,986.82 + \$_2,88	36.00 = \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Part 2:	Determine Whether the Means Test A	pplies to You		-
12. Calcula	ate your current monthly income for the year	Follow these steps:		
12a. (	Copy your total current monthly income from line	e 11	Copy line 11 here	12a. <b>\$_8,872.82</b>
ľ	Multiply by 12 (the number of months in a year).			<b>x</b> 12
12b	The result is your annual income for this part of	the form.		12b. \$_ <b>106,473.84</b>
13. Calcula	ate the median family income that applies to	you. Follow these steps:		
Fill in t	he state in which you live.	New Jersey		
Fill in tl	he number of people in your household.	5		
Fill in t	hemedian family income for your state and size	of household		.13. \$ <u><b>115,552.00</b></u>
	a list of applicable median income amounts, go tions for this form. This list may also be available		the separate	•
	o the lines compare?			
14a. 🗹	Line 12b is less than or equal to line 13. On the Go to Part 3.	ne top of page 1, check box 1, The	ere is no presumption of abuse.	
14b. 🗖	Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 22A–2.	age 1, check box 2, <i>The presump</i>	tion of abuse is determined by Fo	rm 22A-2.
Part 3:	Sign Below			
	Description have described as a continuous section of the continuous s			

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

★ /s/ Chadwick R Lewis
Signature of Debtor 1

/s/ Christine L Lewis

Signature of Debtor 2

Date <u>September 18, 2</u>015 MM / DD / YYYY Date September 18, 2015 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A–2 and file it with this form.

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## B201B (Form 201B) 15-27627-SLM Doc 1 Filed 09/18/15 Entered 09/18/15 19:14:18 Desc Main

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United States 1	Bankruptcy Court	
District o	of New Jersey	

IN RE:	Case No	
Lewis, Chadwick R & Lewis, Christine L	Chapter 7	
Debtor(s)	•	
CERTIFICATION OF NOTICE TO CONCUMER DEPTOR(C)		

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE					
Certificate of [Non-Attorne	y] Bankruptcy Petition Preparer				
I, the [non-attorney] bankruptcy petition preparer signing the debenotice, as required by § 342(b) of the Bankruptcy Code.	otor's petition, hereby certify that I delivered	d to the debtor the attached			
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	petition prepared the Social Secur principal, respon the bankruptcy p	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)			
X	esponsible person, or				
Certificat	e of the Debtor				
I (We), the debtor(s), affirm that I (we) have received and read the	ne attached notice, as required by § 342(b) of	of the Bankruptcy Code.			
Lewis, Chadwick R & Lewis, Christine L	X /s/ Chadwick R Lewis	9/18/2015			
Printed Name(s) of Debtor(s)	Signature of Debtor	Date			
Case No. (if known)	X /s/ Christine L Lewis	9/18/2015			
	Signature of Joint Debtor (if any)	Date			

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.